



PT. Jakarta International Expo

INFECTIOUS DISEASES OUTBREAK SAFE OPERATING PROCEDURE (NOVEL CORONA VIRUS / nCoV)

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Infectious Diseases Outbreak Safe Operating Procedure (Novel Corona Virus / nCoV)**1. INTRODUCTION**

Coronavirus (Cov) is a large family of viruses that cause disease from mild to severe symptoms. There are at least two types of Coronavirus that are known to cause illnesses that can cause severe symptoms such as middle east respiratory syndrome (Mers) and severe acute respiratory syndrome (Sars). Coronavirus disease (covid-19) is a new type of virus that has never been identified before in humans. Corona virus is zoonosis (transmitted between animals and humans). Research mention that sars are transmitted from civet cats to humans and mers from camels to humans. Some coronavirus is known as circulating in animals but has not been proven infecting humans.

Clinical manifestations usually appear within 2 days to 14 days after exposure. common signs and symptoms of coronavirus infection include symptoms of acute respiratory disorders such as fever, coughing and shortness of breath. in severe cases can cause pneumonia, acute respiratory syndrome, kidney failure, and even death.

On December 31, 2019, the WHO China Country Office reported a case of pneumonia of unknown etiology in Wuhan City, Hubei Province, China. On January 7, 2020, China identified pneumonia of unknown etiology as a new type of coronavirus (coronavirus disease, COVID-19). On 30 January 2020 WHO has designated the Public Health Emergency of International Concern (PHEIC). The increase in the number of COVID-19 cases took place quite quickly and there has been a spread outside the Wuhan region and other countries. As of February 16, 2020, 51,857 cases of confirmation were reported globally in 25 countries with 1,669 deaths (CFR 3.2%). Country details and number of cases are as follows: China 51,174 confirmed cases with 1,666 deaths, Japan (53 cases, 1 death and 355 cases on Japanese port cruise ships), Thailand (34 cases), South Korea (29 cases), Vietnam (16 cases), Singapore (72 cases), United States (15 cases), Cambodia (1 case), Nepal (1 case), France (12 cases), Australia (15 cases), Malaysia (22 cases), Philippines (3 cases, 1 death), Sri Lanka (1 case), Canada (7 cases), Germany (16 cases), France (12 cases), Italy (3 cases), Russia (2 cases), United Kingdom (9 cases), Belgium (1 case), Finland (1 case), Spain (2 cases), Sweden (1 case), UAE (8 cases), and Egypt (1 Case). Among these cases, there were already several health workers who were reported to be infected.

The clinical signs and symptoms reported are mostly fever, with some cases having difficulty breathing, and X-rays show extensive pneumonia infiltrates in both lungs. According to preliminary epidemiological investigations, most cases in Wuhan have a history of working, handling, or visiting visitors to the Huanan Seafood Wholesale Market. Until now, the cause of transmission is still not known with certainty.

WHO reports that human-to-human transmission is limited (to close contact and health workers) confirmed in China and other countries. Based on previous MERS and SARS events, human-to-human transmission occurs through droplets, contact and contaminated objects, so COVID-19 transmission is estimated to be the same. Standard recommendations for preventing the spread of infection are through regular hand washing, applying the ethics of coughing and sneezing, avoiding direct contact with livestock and wild animals and avoiding close contact with anyone who shows symptoms of respiratory illnesses such as coughing and sneezing. In addition, implementing Infection Prevention and Control (PPI) while in health facilities, especially emergency departments.

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2. SCOPE

This procedure is used in all work areas under direct or indirect supervision from PT. Jakarta International Expo. This procedure was prepared based on Indonesian government regulations and recommendations and will be updated in accordance with the latest conditions.

3. OBJECTIVE

3.1 General Objective

To provide prompt and effective response to infectious disease outbreaks and to reduce morbidity and mortality to a minimum by being constantly and adequately prepared in managing the outbreak at PT. Jakarta International Expo.

3.2 Specific Objectives

- a. To prevent, control and contain infectious disease outbreaks.
- b. To reduce morbidity and mortality due to infectious disease outbreaks.
- c. To strengthen public health infectious disease surveillance.
- d. To provide general guidelines and develop a mechanism for effective implementation of outbreak management.
- e. To enhance effective emergency and risk communication.
- f. To collaborate and coordinate activities with other relevant agencies, both within and outside the country in managing the outbreak.

In planning appropriate preparedness measures, meeting organizers may consider the following three phases:

- a. **Before the Event** - the period (weeks or months) before the event begins when operational plans for health and security services during the event are developed, tested, and revised.
- b. **During the Event** - the period after plans are finalised and delivery of the event services begins; this may be several weeks before the event itself commences if teams arrive in advance to complete their training/preparations.
- c. **Post event** - the period after the event finishes when participants are returning to their home countries and organisers are reviewing the event delivery and any follow up actions that are necessary as well as planning for lessons learned and event legacy.

4. PROCEDURES

4.1 General Procedures

This general procedure applied for the exhibition and event organizers (organizer), building management (venue), contractors / sub-contractors / vendors, and exhibitors (exhibitor).

1. Pay attention to the latest information as well as the appeal and instructions of the central government and local government related COVID-19. The information can be accessed on a regular basis <https://infeksiemerging.kemkes.go.id> page, www.covid19.go.id and local government policy and ASPERAPI appeal.
2. Ensure all workers / teams involved understand about the prevention of COVID-19 transmission.
3. Provide information media in strategic locations to remind visitors / participants to always follow the provisions of keeping a minimum distance of 1 meter, maintaining hand hygiene

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and the discipline of using masks.

4. Prohibition of entry for visitors / participants / officers / workers who have symptoms of fever, cold cough, sore throat and / or shortness of breath.
5. Ensure the implementation of health protocols is carried out by all parties involved in these activities including third parties (food vendors / sound system vendors and electricity or other related vendors).
6. Inform participants to bring personal equipment such as prayer tools, stationery etc.
7. Prepare a health plan / procedure for emergency mitigation and evacuation in accordance with the planned meeting / event.
8. Ensure that everyone involved in the activity is in good health by measuring body temperature at the entrance. If a temperature of 37.3⁰ C is found (2 examinations with a distance of 5 minutes), no admission to the meeting / activity will be allowed.
9. Ensure that all involved keep a minimum distance of 1 meter in various ways, such as the application of queuing procedures, giving special markings on the floor, scheduling visitor entry and dividing several waves or giving visitors a choice of arrival times and entrance options, when ordering tickets, and so on.
10. Monitor the health of the team / committee / organizer.
11. The organizer of the event (organizer) should adapt the electronic registration for visitors and use electronic promotional materials for exhibitors.
12. The organizer of the event (organizer) prepares identity tags for his work team personnel, contractors / sub contractors / vendors / suppliers, freight forwarders and participants (exhibitors). Identification of activities must be used during preparation, events and breakdown.
13. For participants (exhibitors) / visitors from outside the region / abroad, the application of preventing a disease to prevent departure / arrival follows the provisions of applicable regulations.

4.2 Covid-19 Task Force & Control Management

1. Event organizer (host and co-host) and building management (venue) should establish a task force for the prevention and handling of COVID-19 in every exhibition and event that is carried out.
2. The task force has the following tasks:
 - a. Applying covid-19 health procedures and monitor their implementation..
 - b. Coordinating the prevention and handling of COVID-19 with relevant parties.
 - c. Make a plan to evacuate the isolation room / quarantine and determine the COVID-19 Referral Hospital.
 - d. Coordinate with medical personnel to treat people suspected or having symptoms of COVID-19.
 - e. Report regularly to the related parties
3. Event organizer should establish a crowd control management team to control the crowd at exhibition and event.
4. The crowd control management team has the following tasks:
 - a. Manage the traffic of people in the activity area.
 - b. Unravel the crowd / crowd in the activity area.
 - c. Monitor and control the number of visitors in the exhibition area by 30% of the

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maximum capacity within a certain time period.

5. Organizer's COVID-19 task force should inform the Indonesia New NormICE health procedure and guidelines to the organizer's work team, clients, contractors / sub-contractors / vendors / suppliers, freight forwarders and exhibitors.
6. COVID-19 task force (organizer and venue) will monitor the event preparation and breakdown activities by applying health protocols.
7. Organizer should hold a technical meeting attended by the organizer, venue and other interested parties to deliver preparation process and technical explanation for implementation of the health protocol and Indonesia New NormICE.
8. Organizer should provide signage for information on health protocols, exhibition plans, visitor flows and medical facilities.
9. COVID-19 health protocol, safety evacuation and emergency briefing must be informed at the beginning of the event.

4.3 Registration And Financial Transactions (Payment)

1. Organizer needs to enforce online registration and offline onsite registration is only allowed to be applied in a limited manner by tightening rules according to health protocols such as the queue markers to maintain a safe distance (at least 1 meter), preparing the queuing tent room area and limiting visit times divided into several visiting time.
2. Registration should be applied for each visitor, invited guests, exhibitors, organizers and contractors / sub-contractors (vendors / suppliers). If at any time a copy of the visitor and exhibitor data is needed, it can be given to the venue building management.
3. The registration form must state and fill in the following items:
 - a. Data according to ID card, passport, cellphone number, e-mail, emergency contact and blood type.
 - b. COVID-19 risk self-assessment form . If the results of the self assessment have a high risk, it is not permitted to participate in the activity
 - c. Time schedule of visit days and dates
 - d. Specifically for exhibitors and contractors / subcontractors (vendors / suppliers) must fill in the booth number and name as additional data.
 - e. Clause related to the release of the right to sue or point waiver for the implementation of health insurance (health insurance).
4. Non-cash payments are recommended and disinfection is applied to the payment machine. If you must do a cash transaction, be sure to wash your hands with soap and rinse with running water or use a handsanitizer afterwards.

4.4 Safety Rules For Employee And Visitor

1. Everyone in the event / venue area should comply with the following rules:
 - a. Must use a mask.
 - b. Required to check body temperature with a maximum provision of 37,3⁰ C.
 - c. Wash your hands regularly with running water and soap or use a hand sanitizer.
 - d. Do not touch the eyes of the nose and mouth before washing hands / using a hand sanitizer.
 - e. Avoid physical contact such as shaking hands or hugging and keeping a safe distance of at least 1 meter.

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- f. Applying the ethics of coughing and sneezing in public areas. Use a hand elbow handkerchief if you cough and sneeze.
 - g. It is recommended to bring your own worship equipment.
 2. Prohibition for everyone to be in and do activities in the venue activities area with the following criteria:
 - a. People with COVID-19 symptoms such as coughing colds, fevers and others
 - b. People who have conditions prone to covid-19 such as diabetes, hypertension, pulmonary disorders, heart problems, kidney disorders, autoimmune diseases, pregnancy, elderly, children, toddlers and others.
 3. Everyone who is in the area of the event / venue must comply with the hygiene and safety protocols of self and others.

4.5 Entry Examination Check

1. Every person who will enter the event / venue area is arranged alternately with a minimum distance of 1 meter.
2. The officer will check the body temperature measurement using a calibrated digital thermometer with a maximum temperature tolerance limit of 37,3⁰ C which is allowed to enter the event / venue area. Measurement of body temperature can be done twice with a gap at least 5 minutes, if found people with body temperature more than 37,3⁰ C. If the second check the temperature remains above 37,3⁰ C, the next action is as follows:
 - a. Officers should report to the organizer COVID-19 task force.
 - b. Organizer COVID-19 task force should coordinate with the medical team for the handling of further actions.
3. Officers who take measurements of body temperature must use a mask, face shield and gloves.
4. Officers can refuse to prohibit anyone who does not obey the rules as below:
 - a. Do not use a mask.
 - b. People with symptoms of flu, cough and fever.
 - c. People who bring babies or children under the age of 5 years.
 - d. People who do not meet the requirements according to COVID-19 risk self-assessment instrument.
5. Everyone who has passed the body temperature check is required to use a hand sanitizer before entering the event area.

4.6 Safe Distance & Circulation Management

1. Safe distance in the event implementation is determined as follows:
 - a. The distance of each queue is at least 1 meter
 - b. Distance of interaction between people at least 1 meter
 - c. The distance between seats at least 1 meter
2. Circulation path settings for people are determined as follows
 - a. Using one-way visitor lane to avoid congestion or crowds of people upon arrival during
 - b. in the event area and when leaving the venue
 - c. Separation of the entrance and exit area of the event area. The organizer places officers on each door to count and monitor visitor circulation.
 - d. The number of visitors in the exhibition area is 30% of the maximum capacity within a

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- certain time period.
3. Setting safe position on the elevator by 50% of the maximum capacity.
 4. Setting standing position on the escalator with a safe distance of 2 steps.
 5. Organizer must make arrangements for event visitors by applying the following conditions:
 - a. Organizer should make a boundary markers (queues that adjust the distance of visitors before entering the entrance / event area.
 - b. Organizer should t place a direction indicator / signage as a guide to the distance setting in the event area and event entrance.
 - c. Organizer should place crowd control officers to control and count visitors entering and leaving the event area so that there is no congestion of visitors in one or several stands
 - d. Organizer should enforce different entrance and exit arrangements.
 - e. Organizers should limit the distance of visitors in the booth at least 1 meter.
 - f. Organizer needs to urge visitors to always heed the compliance with applicable regulations.
 - g. Organizer can impose sanctions if visitors do not comply with applicable regulations.
 6. Organizer must make arrangements for event participants (exhibitors) by applying the following conditions:
 - a. Organizer can use 50% of the capacity of the event area for stands / booths.
 - b. Organizer must make a gangway of at least 3 meters.
 - c. Organizer needs to require event participants (exhibitors) to understand and comply with the floor plan that has been adapted to the New Normal protocol while in the event area.
 - d. Organizer must limit the stand / booth clerk to a maximum of 2 people for a 3 x 3 meter stand and apply multiples.
 - e. Organizer can impose sanctions if participants do not comply with applicable regulations
 7. Contractors/ Subcontractor need to coordinate with the organizer in using knock down systems or construction materials modular system to reduce the number of workers and make time efficient.
 8. There must be a regulation for loading and unloading materials for the contractor stand, suppliers and freight forwarders to the area event to avoid buildup or overcrowding of workers and large vehicles in the loading and unloading area.

4.7 Health And Safety Protection Equipment

General equipment should be used and prepared by organizers, exhibitors, venues, contractors / subcontractors / suppliers as follows:

1. Mask for work teams.
2. Face shields are preferred for security guards, SATGAS COVID 19 and medical personnel.
3. Gloves as needed.
4. Calibrated digital infrared thermometer.
5. Trash can.

4.8 Cleanliness, Hygiene And Sanitation

1. The building management will prepare the following:
 - a. Disinfecting the event area. General disinfectant of all areas used is done before the event preparation period (before the loading schedule), while during the preparation period and the exhibition period disinfection of public areas is done after the event ends.

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- b. Providing hand sanitizers at strategic points in public areas and entry access.
 - c. Cleaning high contact points such as elevator buttons, door handles, escalator railings and ATM buttons is done by using disinfectant liquid every 4 hours.
 - d. Regarding air circulation, the venue will maintain air quality by optimizing air circulation. During preparation and breakdown, the air supply optimizes fresh air circulation without cooling. During the event, the air conditioner operates normally with cooling temperature settings as needed.
 - b. Distribution of air by adding fresh air by 25%. The use of exhaust fans for air circulation in the toilet area.
2. Organizer, contractor / sub contractor, freight forwarder and exhibitor are required to disinfect their respective luggage before entering the event area.
3. Related to cleanliness and garbage disposal, building management will provide the following:
 - a. Trash can be placed in outdoor and indoor event areas. Waste disposal is sorted according to the type of organic waste, non-organic waste and hazardous toxic material waste.
 - b. Special trash can for personal protective equipment such as masks and gloves.
 - c. Disposal of waste in public areas, toilets and eating areas will be cleaned with a more frequent frequency, especially in eating and drinking areas and toilets.
4. Contractors / sub-contractors / suppliers / vendors, freight forwarders and exhibitors are responsible for the disposal of the remaining material production at the time of build-up or breakdown.
5. The organizer needs to require the exhibitor to comply with the following rules:
 - a. Disposing of trash in a place that has been provided.
 - b. Disinfecting booths, displayed items and promotional materials.
 - c. Provide covered bins at each stand / booth.
 - d. booth / stand staff must use a mask and face shield.
 - e. Providing hand sanitizer on each stand / booth.
6. The organizer should prepare the cleaning team during the event.
7. The use of plastic limiting installations or similar materials to insulate interactions tailored to the needs.
8. The building management (venue) will determine the access point to enter loading dock during build-up and breakdown with the application of health rules. Venue will provide hand sanitizers or wash basins with running water and soap at specified points.
9. Organizer needs to provide a complete list of contractors and data of workers who will carry out loading and unloading activities to building management (venue).
10. Contractors / Sub Contractors / vendors / suppliers and freight forwarders must ensure that all goods to be brought in are given a base by using tarpaulin carpet and boards that have been sterilized using disinfectants.
11. Organizer need to coordinate with building management (venue) to prepare evacuation routes, isolation rooms / transit rooms, ambulances and medical teams and referral hospital information in efforts to treat people with no symptoms of COVID-19.
12. Organizers need to coordinate with building management (venue) and exhibitor in the implementation of health protocol and New Normal rules on the provision and food and beverage service including the use of cooking and eating utensils, food ingredients, serving and sanitation / waste disposal systems.

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13. Organizer need to coordinate with building management (venue) to prepare the exhibition area for the exhibitor or organizer team.

4.9 Medical Facilities

1. Medical facilities provided by the venue building management are as follows:
 - a. Medical room.
 - b. Temporary isolation / quarantine rooms for people with suspected symptoms of COVID 19 that are separated from medical rooms. This isolation room has a separate air circulation system isolation room from the main building and has direct access to the ambulance.
 - c. List of referral hospitals for handling COVID-19 that can be used if there are cases of people with suspected symptoms of COVID-19.
2. Medical facilities provided by the organizer are as follows:
 - a. Supporting facilities for medical rooms and temporary quarantine isolation rooms such as personal protective equipment (and others) according to the needs
 - b. Medical / paramedic / doctor.
 - c. Ambulance.
3. Medical facilities must be provided by the organizer during the build up, show days and breakdown.

4.10 Penalty

1. Control and supervision in the application of health protocols is carried out by ASPERAPI's COVID-19 task force and related government agencies. If there are parties who do not comply with these rules, a temporary suspension of event will be issued until all rules are met.
2. If there are visitors who do not comply with the health protocol rules, the organizer has the authority to take the following actions:
 - a. Refuse the person concerned to enter the activity area.
 - b. Cancel the registration concerned.
3. If an exhibitor does not comply with the health protocol rules, the organizer has the authority to give a warning as follows:
 - a. Verbal rebuke
 - b. Written reprimand
 - c. Close the stand / booth area.

5. BEFORE THE EVENT

Good planning should ensure robust systems and processes are in place to manage public health issues during mass gatherings. Management (JIEXPO) and organisers should review their plans to ensure they are fit for purpose.

Additional advice could be sought through consultation with global experts.

5.1. Liaison with local and national public health authorities

- a. Event organisers are strongly advised to establish direct links with the local and national public health authorities. This should include the local health service provider for the event.
- b. There should be a nominated liaison person in the organising team and in the designated public health agency. Contact information should be shared that includes 24hr availability.

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- c. Regular contact should be maintained together with JIEXPO HSE Department throughout the planning period to share information, risk assessment, and plans.
- d. Channels of communication between agencies and organisers, and with the public, should be agreed in advance.

5.2. Risk assessment

The decision to proceed with a mass gathering or to restrict, modify, postpone, or cancel the event should be based on a thorough risk assessment. Event planners should undertake such an assessment in partnership with local and national public health authorities.

For highly visible or particularly large events government may provide advice and technical support to organizers for the assessment of on the public health risks associated to the event.

General considerations:

- a. A comprehensive risk assessment should be undertaken at the beginning of the planning phase, reviewed regularly during planning, and updated immediately prior to the handover to the operational phase.
- b. The risk assessment should include the public health authority and should link into the event security assessment.
- c. Risk assessment should include government updated technical guidance including an up-to-date epidemiological situation.
- d. The risk assessment for the event must be coordinated and integrated with the government risk assessment.

Specific considerations:

Information necessary for the risk assessment will include:

- a. Global situation reports as provided by WHO
- b. National infectious disease outbreak situation report
- c. Risk assessment for infectious disease outbreak should consider:
 - General features of outbreak such as:
 - Transmission dynamics
 - Future likely epidemic spread
 - Clinical severity
 - Treatment options
 - Potential for prevention, including available pharmaceuticals and vaccine
 - Specific features of the event such as:
 - Crowd density
 - Nature of contact between participants (i.e. Concerts/religious, indoor/outdoor, layout of the meeting venue(s).
 - Registered/non-registered participants
 - Profession/possible exposure of participants
 - Number of participants coming from outbreak-affected countries/areas.
 - Age of participants. Since elderly age groups suffering co-morbidities appear to be more affected, mass gathering comprised principally of this cohort of people may be associated with increased transmission.
 - Type or purpose of event (e.g., sporting, festival, religious, political, cultural)
 - Duration and mode of travel of participants. If the mass gathering duration is more

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than the incubation period, then most event-associated cases would be expected to occur while the event is underway. In contrast, if the duration is shorter, most cases would likely occur after the event as people travel and return to their home communities.

5.3. Infectious disease outbreak specific action plan

Action plans should be developed to mitigate all risks identified in the risk assessment. Action plans should include:

- a. Integration with national infectious disease emergency planning and response plans
- b. Command and control arrangements to facilitate rapid communication of information and efficient situation analysis and decision making.
- c. Participants will be screened for the disease symptoms on arrival at all entrances.
- d. Participants with flu symptom or fever more than 38°C will be advice to return home and get their own health check at the clinic/hospital (on arrival of premises).
- e. Participants will be isolated in the isolation room and to be send to the designated hospital for treatm JIEXPO Management will decide whether affected participants can continue or resume their role in the event. If there are more than 2 participants suspected with the symptoms, JIEXPO will strongly advise to cancel the event.

If the decision is made to proceed with a mass gathering, planning should consider measures to:

- a. Detect and monitor event related to the infectious disease outbreak .
- b. Reduce spread of the virus.
- c. Manage and treat ill persons.
- d. Disseminate relevant public health messages specific to the infectious disease outbreak.

However, the event will be canceled if there are more than 4 participants discovered with the symptoms. Health department of DKI Jakarta will be contacted to report on the situation.

5.4. Capacity and resource assessment

- a. National health authorities should assess the additional resources and capacity needed to deliver appropriate risk mitigation actions for the local community during (and after) the event for example, additional diagnostic testing capacity, additional isolation and treatment facilities, additional contact tracing resources.
- b. Event organisers should asses the capacity needed, and resources available, to deliver all specific infectious disease outbreak risk mitigation actions that arise from the risk assessment.
- c. Capacity and resources should be coordinated with the public health authority and health service provider to avoid duplication or gaps.

5.5. Risk communication and community engagement plan

Event organisers should agree with the public health authority how participants, and the local population, will be kept informed of the health situation, key developments, and any relevant advice and recommended actions.

6 DURING THE EVENT

The following can be recommended:

Arrangements must be in place for regular communication between event organisers and the public health authority. These arrangements should include:

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- a. Regular and full sharing of information by JIEXPO, organizers and participants.
- b. Arrangement to provide participants with information on accessing health advice.
- c. Arrangements for joint dynamic risk assessment as the event progresses.
- d. Arrangements for communication to participants and local population to ensure single consistent messaging.
- e. To date, there is no scientific evidence that supports screening of participants as a cost-effective measure.

6.1. Risk communication

Risk communication should include:

- a. An overall assessment of the local risk
- b. Advice on preventive measures (especially respiratory etiquette and hand hygiene).
- c. Advice on how to access local health care if necessary (including how to do so without creating a risk to healthcare workers).
- d. Advice on self-isolation and not attending the event if symptoms develop
- e. Disease signs and symptoms, including warning signs for severe disease that requires immediate medical attention.
- f. Advice on self-monitoring for symptoms/signs (including temperature checking) for participants travelling from affected countries.
- g. WHO does not currently recommend quarantine for healthy travellers or other travel restrictions.
- h. Wearing face mask is recommended for participants presenting respiratory symptoms (e.g. cough)

Event organizers, in collaboration with public health authorities, may wish to consider whether specific information or advice is needed about the potential risks that persons at increased risk of severe disease might face in the setting of a mass gathering, especially if the infectious disease outbreak is circulating in the community.

6.2. Surveillance of participants

- a. Detection and monitoring of event-related to the infectious disease outbreak should be considered in the context of surveillance schemes that are already in place and if new or enhanced surveillance is deemed necessary.
- b. Surveillance systems will need to be real time or near real-time to support rapid response actions.
- c. Surveillance systems should be linked to risk assessments so that any abnormal signal in the surveillance systems triggers an immediate revision of the risk assessment.

6.3. Testing/diagnostic arrangements

Organisers need to consider, with the local health authority, how and where participants presenting with the infectious disease outbreak like symptoms will be tested. In few cases, the commercial testing kits for certain infectious disease may not be available. It is unlikely that event medical services will be able to test for the disease and organisers need to ensure that their health provider has access to appropriate testing, probably from the national public health agency. This will also require prior agreement on specimen transport (or participant transport to testing facility).

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6.4. Treatment facilities

- a. JIEXPO provides isolation or medical transit room facilities at the venue for participants who develop symptoms while they are waiting for health assessment. This will depend on the nature of each event and the extent to which the event provides its own medical services rather than the local health service.
- b. Participant who becomes unwell with the infectious disease symptoms will be treated at the nearest Hospital and they will be transported to the treatment facility by organizer's Ambulance. Participants will not be able to remain in the event medical facility. Prior agreement on any consequent funding issues should be confirmed.
- c. Participants at events sometimes expect they will be returned to their home country for medical treatment rather than be treated in the host country; this will not be possible for anyone diagnosed with the infectious disease illness except by the use of specific MedEvac flights with appropriate isolation/containment facilities - such facilities are scarce and expensive and not readily available for illnesses.
- d. Organisers need to consider how any affected participants will be transferred home if their illness extends beyond the end of the event and pre-arranged travel is no longer available.

6.5. Decision making

Organisers, in collaboration with the local health authority, should also agree in advance the circumstances in which risk mitigation measures would need to be enhanced, or the event postponed or cancelled. Pre-agreement on potential trigger points will facilitate these discussions if they become necessary.

- JIEXPO Management will decide whether affected participants can continue or resume their role in the event. If there are more than 2 participants suspected with the symptoms, JIEXPO will strongly advise to cancel the event.
- However, the event will be canceled if there are more than 4 participants discovered with the symptoms. Health department of DKI Jakarta will be contacted to report the situation and to assist with the evacuation/quarantine process.
- Health department of DKI Jakarta will assist with the evacuation/quarantine process where necessary. Organisers to hand out the participants name list during this process. Participants will go through the temperature screening again when exiting the venue. Those with high fever will be put in quarantine.

6.6. Operational practices for reducing event-related transmission of infectious disease outbreak

The basic general principles for reducing transmission of infectious disease outbreak are applicable to a mass gathering.

- a. Stay away from the event when ill.
- b. Persons who feel unwell (i.e. fever, cough, and requiring admission to hospital) should stay at home and keep away from crowds until symptoms resolve. This applies to participants as well as staff.
- c. Promoting appropriate hand hygiene and respiratory etiquette in mass gathering venues requires informational materials that reach a range of age groups and varying reading and educational levels. In addition, soap and water or alcohol hand-sanitizers and tissues should be easily accessible in all common areas, and especially in mass gathering medical treatment sites.

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- d. Isolate persons who become ill while at the mass gathering.
- e. Organizers should plan for the likelihood of persons becoming ill with fever and other typical symptoms during a mass gathering. JIEXPO provides isolation areas in on-site medical treatment facilities where such persons can be initially assessed and triaged should be considered. Persons who are ill can be provided with a mask to help contain respiratory droplets generated from coughing and sneezing. The isolation area should be equipped with the necessary supplies to facilitate hand hygiene and respiratory etiquette. In addition, medical staff attending persons who are ill should wear a mask, then dispose of it immediately after contact and cleanse hands thoroughly afterwards.
- f. International travelers: practice usual precautions
 - In case of symptoms suggestive of acute respiratory illness before, during or after travel, the travelers are encouraged to seek medical attention and share travel history with their health care provider.
 - Public health authorities should provide to travellers information to reduce the general risk of acute respiratory infections, via health practitioners, travel health clinics, travel agencies, conveyance operators and at Points of Entry.
- g. Reduce crowding. Where possible, event organizers should consider distancing measures to reduce close contact among people during a mass gathering (e.g. increasing the frequency of transport, staggering arrivals, diverting departures, and minimizing congregation at sanitary stations and food and water distribution areas).

7 POST EVENT REVIEW

7.1. After the event

After the meeting, if public health authorities suspect transmission of the infectious disease has occurred, meeting organizers and participants should support the response of authorities.

- a. Meeting organizers must liaise with public health authorities and facilitate the sharing of information about all symptomatic participants (ticket itinerary, contact, visa process, hotel booking, etc.).
- b. Individuals who develop symptoms within this period should isolate themselves, seek medical attention and inform the appropriate public health authorities of their potential exposure – both in the meeting’s country and upon returning to their country of origin.
- c. Disinfection on the whole building will be carried out by Health Authority or JIEXPO Management.
- d. Health screening will be conduct for all JIEXPO staff to ensure no one is infected by the virus and safe to continue their duty.
- e. A full report on this incident will be forwarded to the JIEXPO GM Operations and JIEXPO GM Marketing for the Public Relation media statement.
- f. No staff to make any comment regarding this matter to the media.

7.2. Risk communication for departing participants

- a. It may be necessary (both for clinical reasons and under International Health Regulations) to notify the home countries of returning participants of any disease infection while attending the event.
- b. Organisers also need to plan for test results that are reported after the event to be notified to the participant and, possibly, to the home country public health system.



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7.3. Lessons identified

As always, it will be important for lessons from any event to be identified by after action review so that they can be passed on to future event organisers.

7.4. Legacy

Organising mass gatherings during a global health emergency is unusual but can be done depending on risk assessment. Organisers should see any such event as an opportunity to enhance ways of working and to pass this learning on to both future events and the host country.

8 VENUE’s COVID-19 TASK FORCE

JIEXPO has had covid-19 task force consisting of several divisions, we involve the division of HSE, Security, Customer Service, Marketing, House keeping and Engineering in order to oversee the implementation of health protocols covid-19, and can handle COVID-19 cases at JIEXPO quickly and precisely .The duties and responsibilities of COVID-19 Task Force are as follows:

1. Arranging COVID-19 prevention and treatment protocol
2. Ensuring the availability of covid-19 deployment protection facilities for employees and visitors,
3. coordination with relevant departments if there is a risk of spreading the outbreak in the JIEXPO area
4. supervise the compliance of employees and visitors to the protocol that has been socialized.
5. Applying covid-19 health procedures and monitor their implementation..
6. Coordinating the prevention and handling of COVID-19 with relevant parties.
7. Make a plan to evacuate the isolation room / quarantine and determine the COVID-19 Referral Hospital.
8. Coordinate with medical personnel to treat people suspected or having symptoms of COVID-19.
9. Report regularly to the related parties.

The names of JIEXPO’s COVID-19 TASK FORCE are as follows:

- | | | |
|-------------------------------|---------------------------|------------------------------|
| 1. Dr. Dwi (Chief). | 20. Tofan (Marketing) | 39. Ahmad holil (Security) |
| 2. Syahrul. M (Deputy) | 21. Dini (Marketing) | 40. Baudin (Security) |
| 3. Santi. D (Secretary) | 22. Gabriel. S (Security) | 41. Suhardi (Security) |
| 4. MR. Fikri (Secretary) | 23. Titri. D.A (Security) | 42. A. Syarifudin (Security) |
| 5. Suryadi (HSE) | 24. Sutaryo (Security) | 43. Maryanto (Security) |
| 6. Marsudi (HSE) | 25. Putut. S (Security) | 44. Sajidin (Security) |
| 7. Peni. A (HSE) | 26. M. Zaini (Security) | 45. Sugianto (Security) |
| 8. M. Sar’i (HSE) | 27. Surasa (Security) | 46. Andri. P (Security) |
| 9. Abdul Rahman (HSE) | 28. Ridwan (Security) | 47. Budri (Security) |
| 10. Ihsan (HSE) | 29. Cep ari (Security) | 48. Gustinol (Security) |
| 11. Oscar (Customer Service) | 30. Senen. U (Security) | 49. Windar (Engineering) |
| 12. Arsan (Customer Service) | 31. Wagirun (Security) | 50. Taufik (Engineering) |
| 13. Firman (Customer Service) | 32. Ali. S.D (Security) | 51. Aan (Engineering) |
| 14. Andri (Housekeeping) | 33. Yayan. MR (Security) | 52. Slamet (Engineering) |
| 15. Kosim (Housekeeping) | 34. Hartono (Security) | 53. Acung (Engineering) |
| 16. Tumidi (Housekeeping) | 35. Alex.B.S (Security) | 54. Agus. S (Engineering) |

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- | | | |
|--------------------------|--------------------------|---------------------------|
| 17. Sujio (Housekeeping) | 36. Iwan.S (Security) | 55. Hadiyan (Engineering) |
| 18. Leon (Marketing) | 37. Agus.Y (Security) | |
| 19. Erwin (Marketing) | 38. M. Djalil (Security) | |

8 ACTIONS WHEN FINDING WORKERS / VISITOR AFFECTED TO OTG, ODP, PDP OR COVID -19 CONFIRMATION

Note:

- OTG (People without Symptoms) are people who have a history of close contact with COVID-19 (with PCR) confirmation cases but have no symptoms.
- ODP (Insider Monitoring) is a person who has a fever ($\geq 38^{\circ}C$) or a history of fever; or symptoms of respiratory system disorders such as runny nose / sore throat / cough and no other causes based on a convincing clinical picture and in the last 14 days before the symptoms appear have travel history or live in a country / region reporting local transmission or have a history of contact with cases COVID-19 confirmation.
- PDP (Patient Under Supervision) is a person who has a fever ($\geq 38^{\circ}C$) or a history of fever; accompanied by cough / shortness of breath / sore throat / runny nose / mild to severe pneumonia and no other cause based on a convincing clinical picture AND in the last 14 days before symptoms appear to have a history of travel or living in a country / region reporting local transmission * or have a history of contact with the COVID-19 confirmation case.
- Covid-19 confirmation is a patient infected with COVID-19 with a positive test result through a PCR examination.

If you find or have information that workers / visitors meet the criteria as OTG, ODP, PDP or COVID-19 Confirmation in the JIEXPO area, the actions to be taken are as follows:

1. Report and coordinate with the local health center (dinkes) or Puskesmas. (Form 4)
2. Workers who meet the OTG criteria,
 - a. Specimens / swabs are taken for Rapid Polymerase Chain Reaction (RT PCR) examinations by trained / competent health workers.
 - b. If there is no RT PCR inspection facility available, a Rapid Test (RT) inspection can be carried out with follow-up to the RT inspection results can be seen in the following table:

No.	Rapid Test Results	Follow-up	Advanced Examination
1.	NEGATIVE (not reactive)	Perform self quarantine with the application of PHBS and Physical Distancing. (Form 5)	Then re-examination on the 10th day. If the results of the 10th day re-examination are positive, the PCR RT examination will be carried out 2 times for 2 consecutive days at the health facility / laboratory designated by the Government.



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2.	POSITIVE (reactive)	Perform self quarantine with the application of PHBS and Physical Distancing. (Form 5)	And immediately do the confirmation check with RT PCR 2 times for 2 consecutive days at the health facility / laboratory designated by the Government.
		<p>If a positive confirmed OTG shows symptoms of fever (> 38 ° C) or coughing / runny nose / throat pain during quarantine, then;</p> <p>a. If mild symptoms do self-isolation at home for 14 days.</p> <p>b. If the symptoms are being isolated in an emergency hospital,</p> <p>b. c. If severe symptoms are isolated in a referral hospital</p>	

3. Workers / visitors who meet the ODP criteria,
- Specimens / swabs were taken for Rapid Polymerase Chain Reaction (RT PCR) examinations on days 1 and 2 by trained / competent health workers.
 - If there is no RT PCR inspection facility available, a Rapid Test (RT) examination can be performed. No further RT inspection results can be seen in the following table:

No.	Rapid Test Results	Follow-up	Advanced Examination
	NEGATIVE	Perform self quarantine by implementing PHBS (clean and healthy living behavior) and Physical distancing	Then re-examination on the 10th day. If the results of the 10th day re-examination are positive, the PCR RT examination will be carried out 2 times for 2 consecutive days at the health facility / laboratory designated by the Government.
	POSITIVE	Perform self quarantine with the application of PHBS and Physical Distancing	And immediately do the confirmation check with RT PCR 2 times for 2 consecutive days at the health facility / laboratory designated by the Government.
		<p>If a positive confirmed ODP shows symptoms of worsening, then:</p> <ul style="list-style-type: none"> If symptoms are being isolated in an emergency hospital. (Fever> 38 ° C, Shortness of breath, persistent cough and sore throat. If severe symptoms are isolated in a referral hospital (Fever> 38 ° C that persists severe ISPA / severe pneumonia) 	



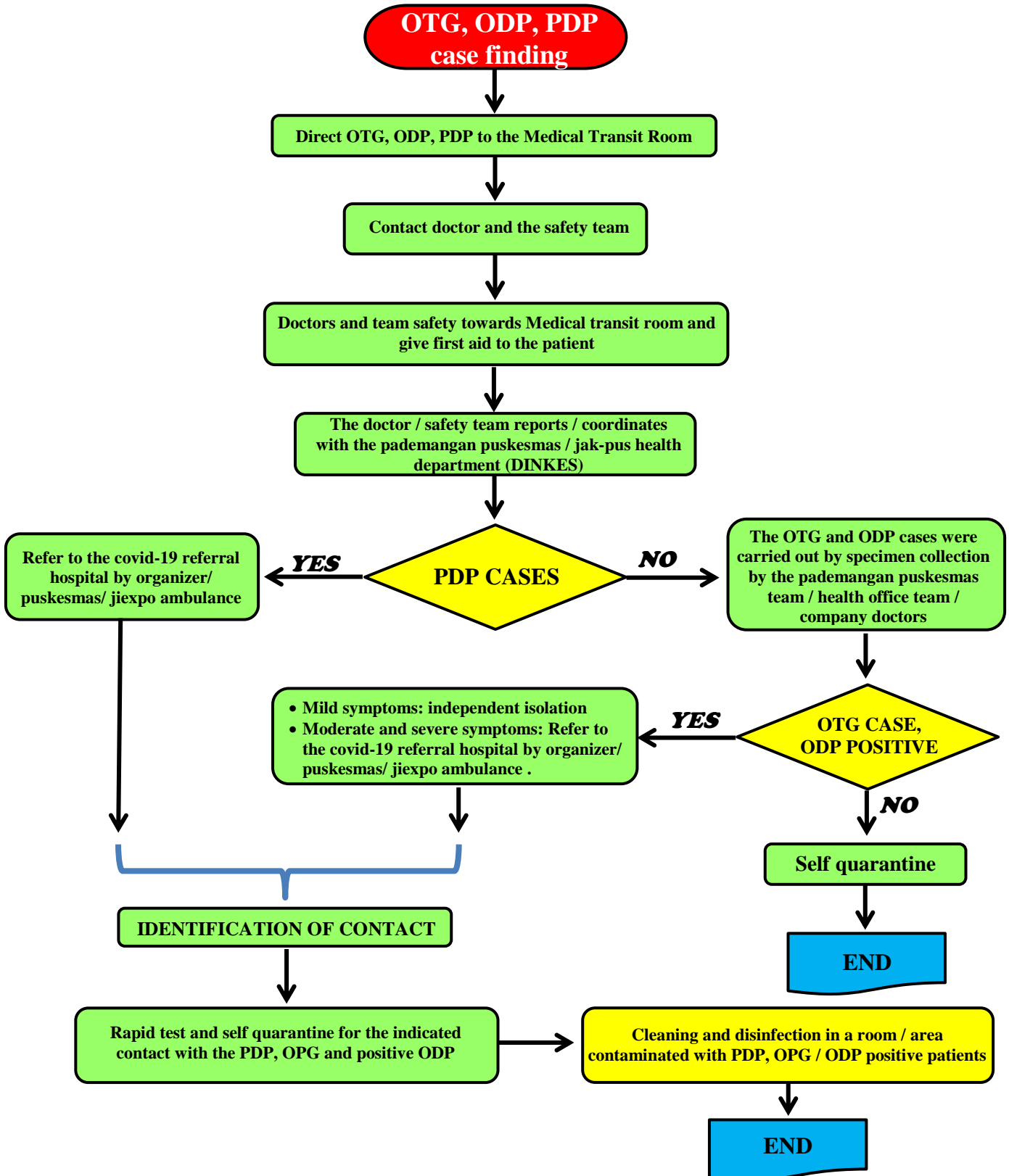
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4. Workers who meet the PDP criteria must be immediately referred to the designated referral hospital.
5. Every worker with PDP status and a positive confirmation case must have an Epidemiological Investigation (Form 6). This activity was carried out to find close contact / OTG.
6. Next thing to do:
 - a. Contact identification in the workplace environment is identifying other people / workers who have a history of interacting with ODP, PDP or positive confirmation workers within a 1 meter radius according to the COVID-19 prevention and control guidelines, use the close contact identification form in the work environment.
 - b. Workers who are in contact with ODP, PDP or positive confirmation workers are grouped into 2 groups (rings) based on the last 14 days the worker has activities:
 - 1) Ring 1: Workers and other people who have interacted directly within a 1 meter radius with ODP, PDP or positive confirmation workers.
 - 2) Ring 2: Workers and other persons in 1 (one) room with ODP, PDP or positive confirmation workers.
 - c. Workers who have been identified as belonging to Ring 1 and Ring 2 are subjected to Rapid Tests and self quarantine / isolation (working from home) by applying PHBS and Physical Distancing (procedures according to OTG criteria above). If there are symptoms immediately report to the health worker.
 - d. Self quarantine can be done at the worker's home or quarantine / isolation place provided by the workplace / Government. To enter the quarantine place, the Government is carried out in accordance with applicable regulations. The implementation of self quarantine .
 - e. Immediately do cleaning and disinfection in rooms / work areas contaminated by sick workers ODP, PDP or positive confirmation COVID-19.
 - 1) Cover the room / work area that has been used by a sick worker for at least 1 x 24 hours before the cleaning and disinfection process is carried out to minimize the potential exposure to respiratory droplets.
 - 2) Cleaning is done by wiping all work areas on surfaces that are often touched by sick workers with disinfectant fluids (for example tables / work areas, door handles, banisters, elevators, water faucets, etc.)
 - 3) Spraying with disinfection fluids in rooms contaminated by sick workers (such as work spaces, meeting rooms, toilets, worship rooms, etc.).
 - 4) Open the door and window towards the open space to increase air circulation in the place. If possible wait again for 1 x 24 hours after the cleaning and disinfection process is done.

Infectious Diseases Outbreak Safe Operating Procedure (Novel Corona Virus / nCoV)

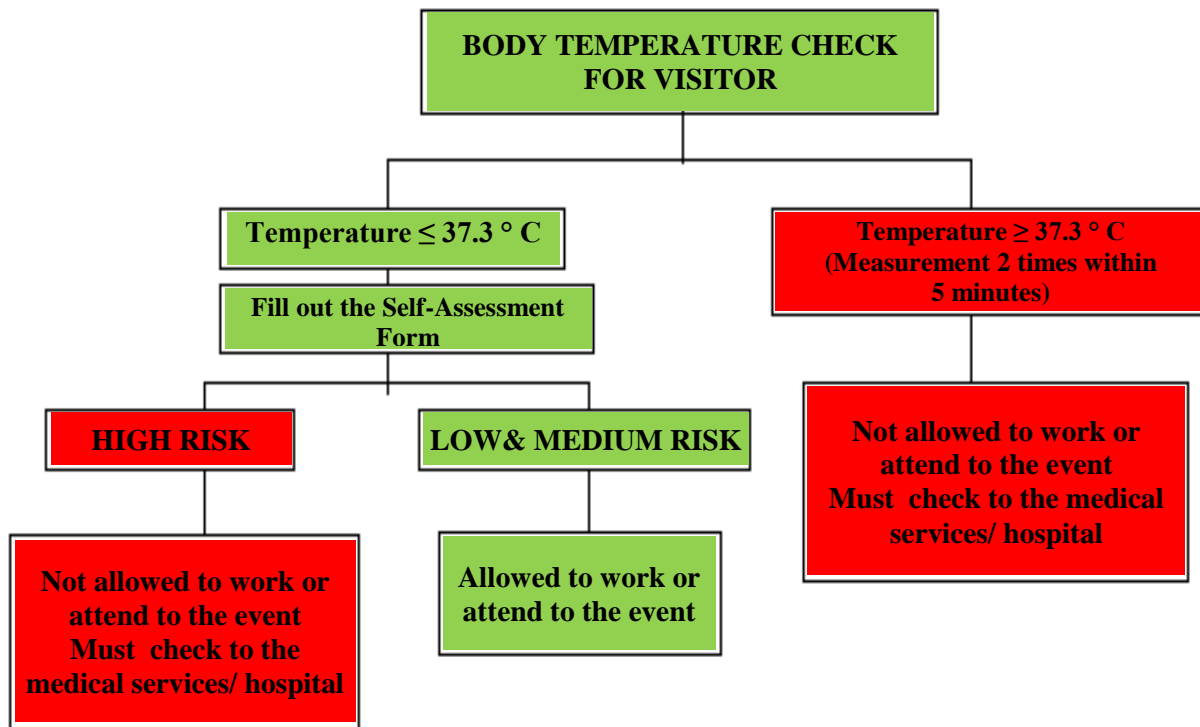
9 SPECIAL PROCEDURES FOR COVID-19 CASES OR OTHER PANDEMIC DISEASES.

If you find / get information about workers, visitors, contractors or tenants who meet the criteria as OTG, ODP, PDP or co-19 confirmation, follow the procedure below:



10 SCREENING PROCEDURES OF ORGANIZER, EXHIBITOR AND VISITORS.

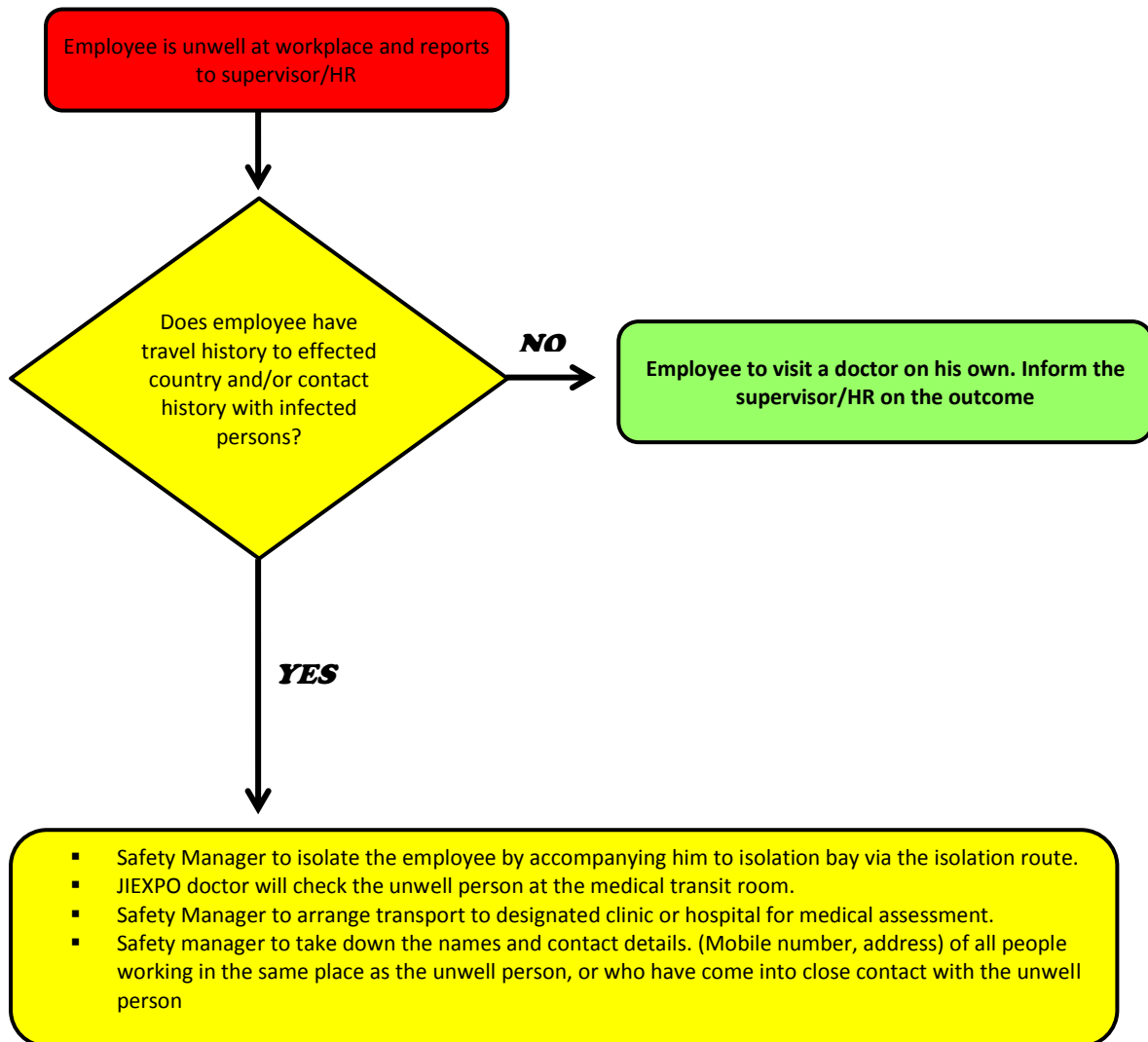
SOP #1: Example of a workflow for organizer, exhibitor and visitors screening at the workplace



Remarks:

- Workers: not allowed to work, rest at home for self-quarantine.
- Guests: are not permitted to enter the workplace any deeper.
- Goods delivery: goods left in the front room, disinfected on the goods and then forwarded to the recipient

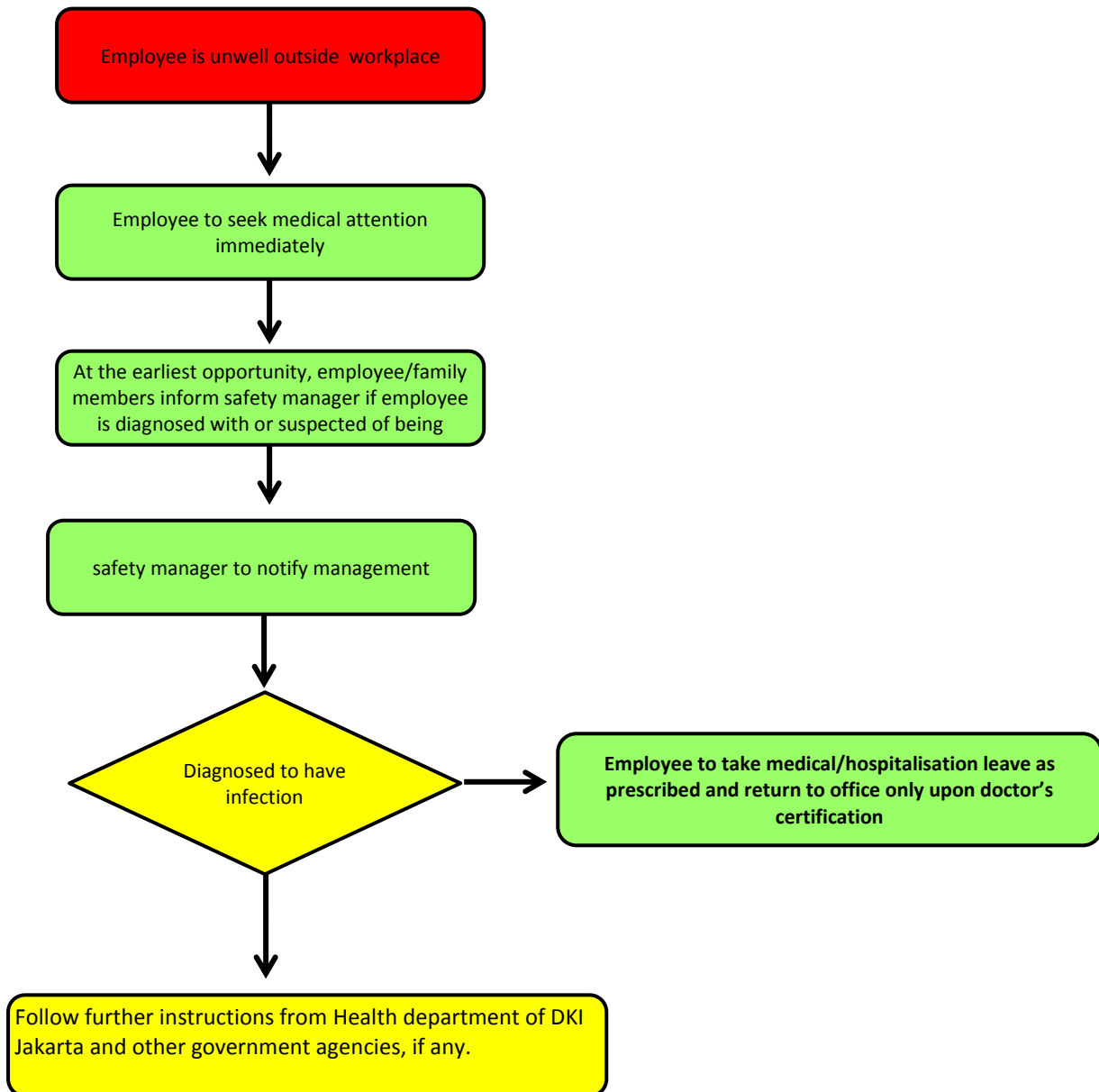
SOP #2: Example of a workflow for managing an unwell employee at workplace



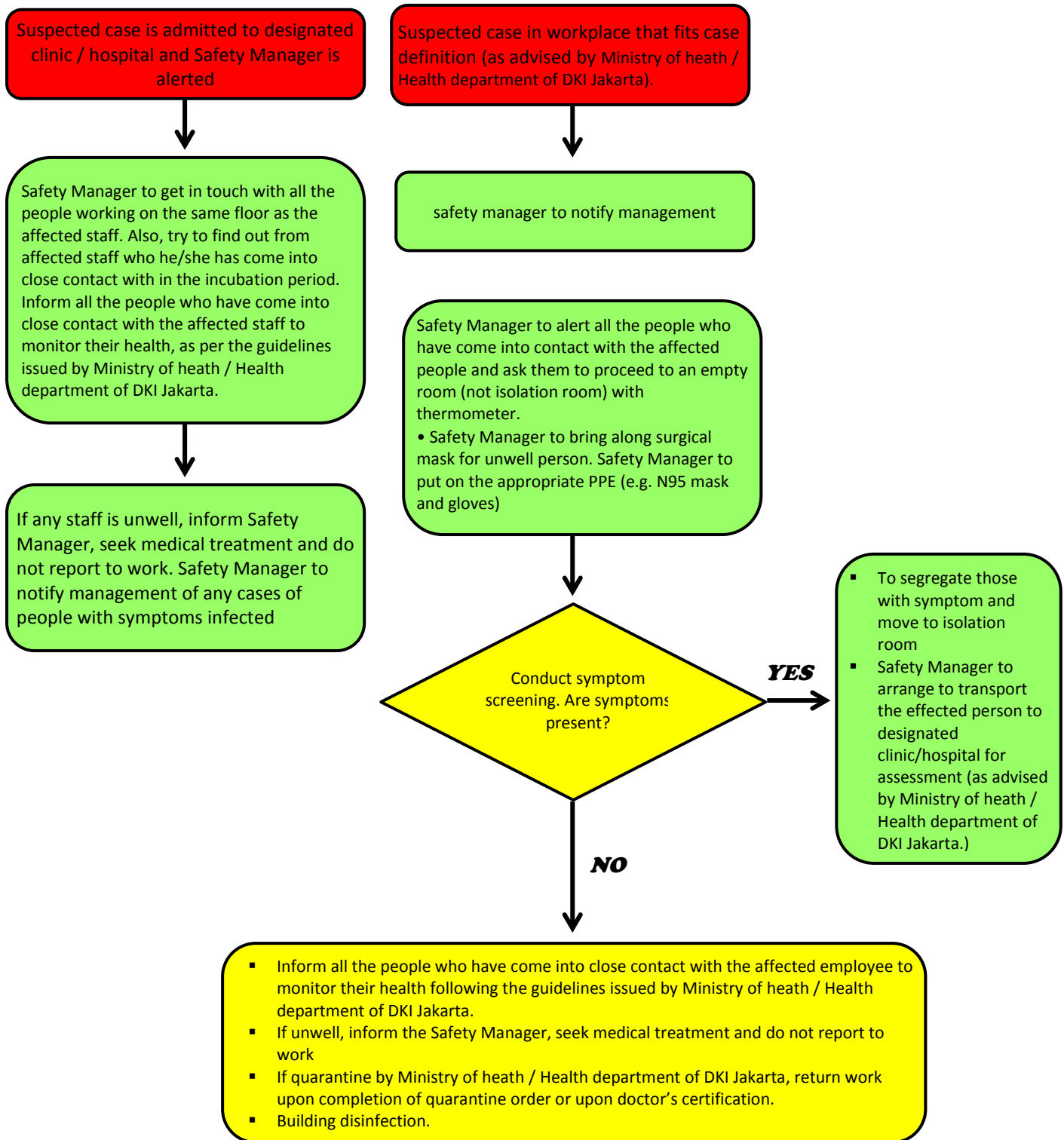
Additional Note:

- Additional procedures and measures may be required if advised by Health department of DKI Jakarta and other government agencies.

SOP #3: Example of a workflow for managing employee unwell outside workplace



SOP #4: Example of a workflow for contact tracing



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11 FORMS

11.1 Self Assessment Instruments For Employee and Visitor

SELF ASSESSMENT INSTRUMENTS

COVID-19 RISK

Name :

ID card/Passpor No. :

Work Unit / Section / Division :

Date :

FOR THE HEALTH AND SAFETY AT WORK, YOU MUST BE HONEST IN ANSWERING THE QUESTIONS BELOW.

In the past 14 days, have you experienced any of the following:

No	QUESTIONS	YES	NO	IF YES, SCORE	IF NOT, SCORE
1	Have you ever left the house / public place (markets, health facilities, crowds of people, etc.)?			1	0
2	Have you ever used public transportation?			1	0
3	Have you ever traveled outside the city / international? (affected area / red zone)			1	0
4	Do you participate in activities that involve people?			1	0
5	Do you have a history of close contact with people who are declared ODP, PDP or confirm COVID-19 (shaking hands, talking, being in one room / one house)?			5	0
6	Have you ever experienced a fever / cough / runny nose / sore throat / tightness in the last 14 days.			5	0
TOTAL AMOUNT					

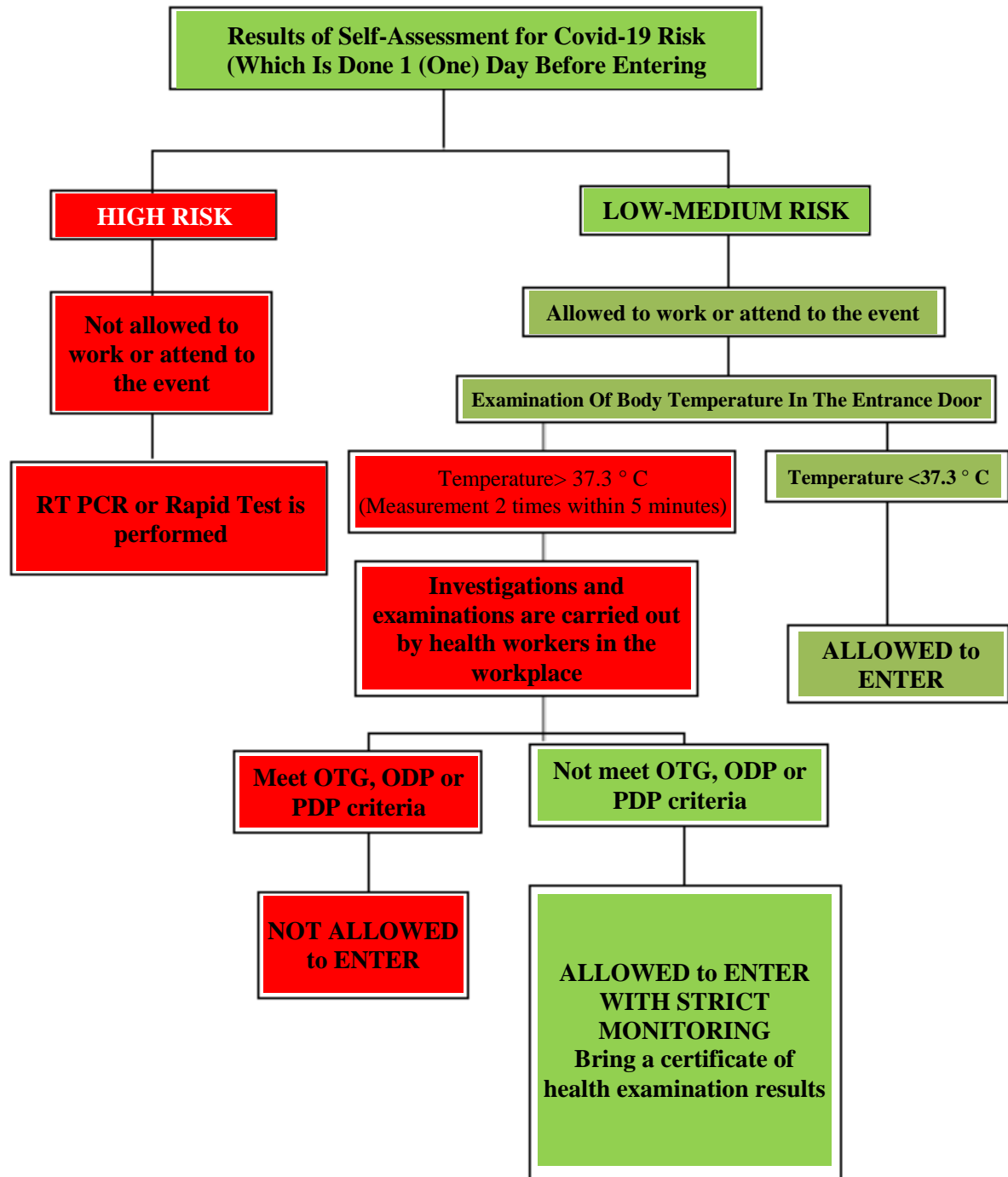
Note:

- 0 = Small Risk
 1 - 4 = Medium Risk
 > 5 = High Risk

FOLLOW-UP :

- High risk, needs to be investigated and not allowed to go to work or come to events. Workers / visitors need to do RT-PCR examination, if not available, Rapid Tests can be done by local health workers / health facilities.
- Minor risk - moderate, allowed to enter work but a temperature check is performed at the workplace entrance. If the body temperature is $> 37.3^{\circ}\text{C}$, it must be investigated and examined by health workers. If it is confirmed that the worker does not meet the OTG, ODP or PDP criteria. Workers can come to work. Workers can come to work.

11.2 Follow-Up Flow For Covid-19 Self Assessment





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11.3 Notification Form for Employees / Visitor

Suspected infection case at work

Details of affected employee

Name:	Department/worksite:	Location of isolation:
Job title:	Nationality:	ID Card / Passport no* .:
Address:		Contact number:
Symptoms: <input type="checkbox"/> Fever <input type="checkbox"/> Body aches <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Sore throat <input type="checkbox"/> Tiredness <input type="checkbox"/> Dry cough <input type="checkbox"/> Headache <input type="checkbox"/> Runny nose <input type="checkbox"/> Others Details: _____		
Date & time of fever onset:		
Date & time of isolation:		
Travel history.		
Countries visited:		
Area/location of movement:		

Details of recording employee

Name	:
Job title	:
Address	:
Contact no	:
Date & time of recording	:

*Note: Information captured is used for contact tracing if required



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12 PROPOSED ADDITIONAL ANTI-VIRUS MEASURES AT VENUES.

1. Deep clean/fogging disinfection treatment across the entire venue.

JIEXPO:

a. Deep Clean Schedule

No	Description	Frequency
1	When there is no event	2 times a month
2	when there is an event	<ul style="list-style-type: none"> ▪ 3 days before the event opens ▪ Every day during the event

b. Fogging Schedule

No	Description	Frequency
1	When there is no event	4 times a month
2	when there is an event	2 days before the event opens

Note :

We will work with event organizer on the deep clean and fogging service requirement

2. Maintain good ventilation throughout venue.
JIEXPO: Yes, we do cleaning on the exhaust fan cover, indoor portable ac unit twice a month and we clean the AHU filter 2 times a month. We also open and close the loading door once a week and the main entrance every day to maintain air circulation in the venue
3. Flooring/mats etc. at main entrances sprayed with diluted bleach.
JIEXPO: We do not spray diluted bleach on flooring, We do not have mats. However we clean floors with an automatic scrubber machine 2 times a month and 2 days before the event opens we also do it.
4. Escalator handrails, door handles, lift buttons etc. disinfected.
JIEXPO: Yes, we do it every day.
5. Washrooms have attendants to carry out on-going cleaning and disinfecting work.
JIEXPO: Yes, we provide attendants at the washroom at all times.
6. Provide liquid soap and disposable paper towels/hand driers for hand washing.
JIEXPO: Yes, these are provided in all our washrooms.
7. Signage/graphics in washrooms on effective handwashing, and sanitary use of toilets.
JIEXPO: Yes, We provide relevant signage in the washroom.
8. Ensure toilet flushing systems function at all times.
JIEXPO: Yes, we ensure it every day.
9. Tables, chairs etc. inside the venues disinfected.
JIEXPO: We do not disinfect our furniture in the venues, but we do deep clean on Tables, chairs etc inside the venues 2 times a month and 2 days before the event opens.
10. Additional hand sanitizers provided in public circulation areas, restaurants.
JIEXPO: Yes, hand sanitizers are provided in these areas, at all main entrances and upon requests.
11. Temperature checks (by hand-held thermometers, or thermal infra-red scanners) for everyone entering the venue (including venue staff, exhibitors, visitors, contractors) – performed as a venue requirement.
JIEXPO: Currently we have thermal gun to check body temperature for all guests and staff entering the venue.
12. Face masks available at Information/Customer Services counters upon request.
JIEXPO: Face masks are available at medical transit room and for who is unwell only.
13. All frontline venue staff is required to wear face masks.
JIEXPO: All front line staff will wear masks during service.

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14. Food handlers working in open kitchens and F&B outlets are required to wear face masks.
JIEXPO: Yes, we provide face mask for them.
15. Specific rubbish bins for disposal of used face masks provided at venue exit points.
JIEXPO: Yes, it's available and we can determine the location with event organizers.
16. Hygiene advice signage at main entrances.
JIEXPO: Yes, it's available at all main entrances.
17. Attendees feeling unwell advised to seek medical care (onsite First Aid).
JIEXPO: There are onsite doctor, nurse and first aider to assist.
18. Provide isolation room for attendees if required (such as waiting for ambulance).
JIEXPO: Yes, it's available at trade mart building ground floor.

13 JIEXPO PREVENTIVE ACTIONS TO DEAL WITH NOVEL CORONAVIRUS ISSUE (2019-NCOV)

1. Socialize the symptoms, signs and how to prevent corona virus to all employees, tenants, building occupants and visitors through poster, meetings and training, interactive videos and social media.
2. Maintain environmental sanitation and encourage personal hygiene by:
 - Perform wiping in all areas and public facilities on a regular basis using disinfectant fluids.
 - Provide hand sanitizers in several locations that are easily accessed by all visitors, employees and residents of the building.
 - Provide hand washing soap and washbasins throughout the toilet.
3. Conduct early detection by checking body temperature using a thermal gun at each entrance of the building. If body temperature $\geq 37,5^{\circ}$, we will advise you to consult the nearest health service immediately.
4. Establish the procedures for handling patients who are indicated infected by corona virus and will be referred to hospital which has been set by government such as:
 - RSPI Sulianti Suroso (+6221 650 6559).
 - RSPAD Gatot Subroto (+6221 344 1008).
 - RS Persahabatan (+6221 4891 1708).
5. Provide medical transit rooms/ isolation room in the JIExpo area.
6. Provide medical personnel and ambulances as a means of medical transport.
7. JIExpo will continue to update the development of information relating to Novel Coronavirus issue from government (Ministry of Health), relevant agencies and other reliable sources.

15 COVID-19 REFERRAL HOSPITAL

1. RSPI Prof. Dr. Sulianti Saroso

Jl. Sunter Permai Raya, Tanjung Priok, Jakarta Utara. Telp: (021) 6506559

2. RSUP Persahabatan

Jl. Persahabatan Raya No.1, Jakarta Timur. Telp: (021) 4891708, 4891745

3. RSUP Fatmawati

Jl. TB Simatupang c No.18, Cilandak, Jakarta Selatan. Telp: (021) 7501524

4. RSUD Cengkareng

Jl. Bumi Cengkareng Indah No.1, Cengkareng, Jakarta Barat. Telp: (021) 54372882

5. RSUD Pasar Minggu

Jl. TB Simatupang No.1, RW.5, Pasar. Minggu, Jakarta Selatan. Telp: (021) 29059999

6. RS Bhayangkara TK. I R. Said Sukanto

Jl. Raya Jakarta-Bogor, Kramat Jati, Jakarta Timur. Telp: (021) 8093288

7. RSPAD Gatot Subroto

Jl. Abdul Rahman Saleh Raya No.24, Senen, Jakarta Pusat. Telp: (021) 3441008

8. RSAL dr. Mintocharjo

Jl. Bendungan Hilir No.17 A, Bendungan Hilir, Jakarta Pusat. Telp: (021) 5703081

9. RS Pertamina Jaya

Jl. Jenderal Ahmad Yani No.2, Cempaka Putih Tim, Jakarta Pusat. Telp: (021) 4211911

10. Rumah Sakit Pelni

Jl. Ks. Tubun No. 92-94, RT 13 RW 1, Slipi, Palmerah, Jakarta Barat. Telp: (021) 5306901

11. RSKD Duren Sawit

Jl. Duren Sawit Baru No. 2, Pondok Bambu, Duren Sawit, Jakarta Timur. Telp: (021)
8615555, 8628686, 8617601

12. RSUD Tarakan

Jl. Kyai Caringin No. 7, Cideng, Gambir, Jakarta Pusat. Telp: (021) 3503003 ext 1148

13. RS Darurat Covid-19 Wisma Atlet Kemayoran

Jl. Danau Sunter Barat No.1, Sunter Agung, Tj. Priok, Jakarta Utara. Telp: 119 ext 9

14. RSUD Koja

Jl. Deli No. 4, Koja, Jakarta Utara. Telp: (021) 43938478

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15 PHOTOS

<p>Pemeriksaan Suhu Tubuh Untuk Semua Karyawan dan Pengunjung Yang Akan Masuki Area JIExpo</p>	<p>Penyediaan Hand Sanitizer di Setiap Pintu Masuk dan Beberapa Lokasi Yang Mudah Diakses Oleh Karyawan dan Pengunjung Gedung</p>
<p>Body temperature measurement at the entrance</p>	<p>Hand sanitizer in public areas (Main entrance, lobby lift, etc.)</p>
<p>Usahakan Setiap Menekan Tombol di Public Area Menggunakan Bantu Jari</p>	
<p>Deep clean process on the door handle</p>	<p>Deep clean process on the door handle</p>
<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>	<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>
<p>Deep clean process on the elevator button</p>	<p>Deep clean process on furnitures</p>
<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>	<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>
<p>Deep clean process on the washroom</p>	<p>Fogging process on the venue</p>

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<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>	<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>
<p>Fogging process on the venue</p>	<p>Fogging process on the venue</p>
<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>	<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>
<p>Fogging process on the venue</p>	<p>Fogging process on the venue</p>
<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>	<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>
<p>Clening process on AHU filter</p>	<p>Clening process on AHU filter</p>
<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>	<p>Menjaga Sanitasi Lingkungan Secara Rutin Dengan Melakukan Wiping dan Sanitize Function Hall Menggunakan Cairan Disinfectant</p>
<p>Deep clean process on the F & B Kitchen</p>	<p>Food handlers are required to wear face masks</p>

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<p>Medical Transit room/ Isolation room</p>	<p>Medical Transit room/ Isolation room</p>
<p>Disinfectant Chamber at main entrance</p>	<p>Hygiene advice signage at main entrances</p>

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4.1 HAND SANITIZER, DISINFECTANT CHAMBER AND MEDICAL TRANSIT ROOM LAY OUT

LEGEND:

- : Medical Transit Room
- : Disinfectant Chamber
- ⌘ : Hand Sanitizer

